

LEGAL SEPARATION WITH CHILDREN For Petitioner Only

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To File for Legal Separation Part 1: Petition and First Court Papers (Forms Packet)

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SELF SERVICE CENTER

TO FILE FOR LEGAL SEPARATION WITH CHILDREN

**Part 1: Petition and First Court Papers
(Forms Only)**

How to assemble these documents

This packet contains court forms to file for a Legal Separation With Children. Be sure the documents are in the following order:

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SELF SERVICE CENTER
PETITION AND PAPERS FOR LEGAL SEPARATION
WITH CHILDREN
CHECKLIST

Use the forms and instructions in this packet only if the following factors apply to your situation:

- ✓ You want to file for legal separation. Warning: if the other party does not want a Legal Separation, the court will not enter a legal separation. The court can, however, change the Petition for Legal Separation into a Petition for Dissolution of Marriage (divorce), if you and/or your spouse have lived in Arizona for the last 90 days prior to filing the Petition for Legal Separation; **AND**
- ✓ You are not ready to file for divorce; **AND**
- ✓ You and your spouse have children with each other OR the wife is pregnant by the husband or will be pregnant by the husband before the legal separation is over; **AND**
- ✓ The children have resided (lived) in Arizona at least 6 months before you will file the Petition for Legal Separation or you talked to a lawyer who advised you that even so you could pursue the case in Arizona; **AND**
- ✓ Either you or your spouse live in Arizona or is/are a member of the armed services and stationed in Arizona; **AND**
- ✓ Either you or both you and your spouse desire to live separate and apart or your marriage is irretrievably broken (over); **AND**
- ✓ You or your spouse has tried to conciliate through Conciliation Court, or there is no point in trying to conciliate because the marriage is over and conciliation will not help.

READ ME: It is very important for you to know that when you sign a court document, you may be helping or hurting your court case. Before you sign any court document, or get involved with a court case, it is important that you see a lawyer to make sure you are doing the right thing. The Self-Service Center has a list of lawyers who can give you legal advice and can help you on a task-by-task basis for a fee. If you want to know more about our list of lawyers and our list of mediators, ask the Self-Service Center staff.

Superior Court of Arizona
Maricopa County
Family Court Cover Sheet

For Use *WITH* Minor Children

Check only one:

- ☐ **Dissolution (Divorce)**
☐ **Legal Separation**
☐ **Annulment**
☐ **Order of Protection**
☐ **Paternity**
☐* **Custody/Visitation**
☐* **Child Support**
☐ **Other**

* Check only if no other category applies

Case Number (Clerk will stamp
case # when documents are filed)

ATLAS number(s): (if applicable)

Instructions:

- You must provide the following information about yourself and the other party.
- Type or print neatly in black ink.
- If more room is needed for children or Petitioner/Respondent, please attach a separate page.

Information About the Petitioner:

Name: _____

Address: _____

City, State, Zip: _____

Home phone #: (____) _____

Work phone number: (____) _____

Cell phone/pager: (____) _____

Date of Birth: _____

Social Security #: _____

E-mail address: _____

Information About the Respondent:

Name: _____

Address: _____

City, State, Zip: _____

Home phone #: (____) _____

Work phone number: (____) _____

Cell phone/pager: (____) _____

Date of Birth: _____

Social Security #: _____

E-mail address: _____

Lawyer's Name and Bar Number: _____

(Provide this information only if YOU have an attorney)

Names, Dates of Birth, and Social Security Numbers for Minor Children Involved:

Name: _____ DOB: _____ SSN: _____

Name: _____ DOB: _____ SSN: _____

Name: _____ DOB: _____ SSN: _____

Name: _____ DOB: _____ SSN: _____

Names and D/O/B's of any OTHER minor children of the petitioner and/or the respondent, who are NOT involved in this case: _____

Have there been any other cases (EXCLUDING minor traffic offenses) in any court involving members of this family? ☐ Yes ☐ No. If yes, please describe, and provide case numbers if known:

Domestic Violence Section

Is anyone mentioned on this cover sheet currently a victim of any family or domestic violence?

☐ Yes ☐ No

Has anyone listed on this cover sheet been the plaintiff, defendant, or named in a petition for an Order of Protection? ☐ Yes ☐ No

If Yes, please identify: _____

Was the Order of Protection granted by the Maricopa County Superior Court?

☐ Yes ☐ No

If No, in what court was the Order of Protection granted?

Children's Issues Section

Are any of the children named above in any physical danger due to abuse or neglect?

☐ Yes ☐ No

Has anyone named on this sheet had any involvement with Child Protective Services in Arizona?

☐ Yes ☐ No

If Yes, please provide the CPS or Juvenile Court case number:

INTERPRETER: Is an interpreter needed for either of the parties? If so, please check the appropriate boxes below. **NOTE: THIS IS NOT A REQUEST FOR AN INTERPRETER, THIS INFORMATION IS TO BE USED FOR INTERNAL PURPOSES ONLY.**

☐ Petitioner ☐ Respondent Language: ☐ Spanish ☐ Other _____

LOCATION (Check the Superior Court location where you are filing these documents):

☐ Downtown Phoenix ☐ Southeast Regional (Mesa) ☐ Northwest Regional (Surprise)

Name of Person Filing: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self, Without a Lawyer or ☐ Petitioner or ☐ Respondent

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

Name of Petitioner

Case Number: _____

AND

PETITION FOR LEGAL SEPARATION WITH CHILDREN

Name of Respondent

STATEMENTS MADE TO THE COURT, UNDER OATH: GENERAL INFORMATION:

1. INFORMATION ABOUT ME, THE PETITIONER

Name: _____
Address: _____
Date of Birth: _____
Social Security Number: _____
Job Title: _____
I have lived in Arizona for _____ years and/or _____ months in a row.

2. INFORMATION ABOUT, MY SPOUSE, THE RESPONDENT

Name: _____
Address: _____
Date of Birth: _____
Social Security Number: _____
Job Title: _____
Respondent has lived in Arizona for _____ years and/or _____ months in a row.

3. INFORMATION ABOUT MY MARRIAGE:

Date of Marriage: _____
City and state, or country where we were married: _____

4. CHILDREN OF THE PARTIES WHO ARE LESS THAN 18 YEARS OLD (check one box):

☐ There are **no** children under the age of 18 either born to, or adopted by, the parties.
NOTE: IF YOU CHECKED THIS BOX, STOP. YOU SHOULD BE USING THE PETITION PACKET TO GET A DIVORCE WITHOUT CHILDREN.

☐ The following child(ren) are under age 18 and were born to or adopted by my spouse and me:
(Attach extra pages if necessary).

Child's Name: _____

Social Security No.: _____ Birthdate: _____
Address: _____
Length of Time at Address: _____

Child's Name: _____
Social Security No.: _____ Birthdate: _____
Address: _____
Length of Time at Address: _____

Child's Name: _____
Social Security No.: _____ Birthdate: _____
Address: _____
Length of Time at Address: _____

Child's Name: _____
Social Security No.: _____ Birthdate: _____
Address: _____
Length of Time at Address: _____

5. **RESIDENCY REQUIREMENT:** When I file this document with the Court, either ☐ I or ☐ my spouse live or are stationed while a member of the Armed Forces, in Arizona. **(WARNING: If this statement is not true, you cannot file for legal separation until it becomes true.)**
6. **DESIRE TO LIVE SEPARATE AND APART.** My marriage is irretrievably broken (my marriage is over) or I and/or my spouse desire to live separate and apart. (This must be a true statement or you cannot file for a Petition for Legal Separation.)
7. **DOMESTIC VIOLENCE.** (Check the box that is true if you intend to ask for joint custody):
Significant domestic violence ☐ has OR ☐ has not occurred during this marriage.
8. **PREGNANCY**
☐ Wife is not pregnant, OR
☐ Wife is pregnant
The baby is due on _____ (date), (and, check one box below):
☐ The Petitioner and Respondent are the parents of the child, OR
☐ Petitioner is not the parent of the child, OR.
☐ Respondent is not the parent of the child.
9. **SPOUSAL MAINTENANCE (ALIMONY).** (Check the box that applies to you):
☐ Neither party is entitled to Spousal Maintenance (alimony), OR
☐ Petitioner OR ☐ Respondent is entitled to Spousal Maintenance because: (Check one or more of the box(es) below that apply. At least one reason must apply to get spousal maintenance.)
☐ Person lacks sufficient property to provide for his or her reasonable needs;
☐ Person is unable to support himself or herself through appropriate employment;
☐ Person is the custodian of a child(ren) whose age or condition is such that the person should not be required to seek employment outside the home;
☐ Person lacks earning ability in the labor market adequate to support himself or herself; and,
☐ Person contributed to the educational opportunities of the other spouse or had a marriage of long duration and is now of an age that precludes the possibility of gaining employment adequate to support himself or herself.

INFORMATION ABOUT PROPERTY AND DEBTS:

10(a) PROPERTY ACQUIRED DURING THE MARRIAGE: (Check one box)

- ☐ My spouse and I did not acquire community property during the marriage, OR
- ☐ My spouse and I acquired community property during our marriage, and we should divide it as follows: (List the property and the value of the property, and check the box to tell the Court who should get the property.)

WARNING: You must be specific. You must describe the property that should go to you and then check the box, and describe the property that should go to your spouse, and check the box. For example, under household furnishings you could say, blue and white living room sofa, and then check the box to say whether it should go to you or to your spouse. Never list an item and then check both the Petitioner box and the Respondent box.

DESCRIPTION OF PROPERTY/
VALUE OF PROPERTY:

You, Petitioner

Your Spouse, Respondent

☐ Real estate at: _____

☐☐

Legal Description: _____

☐ Real estate at: _____

☐☐

Legal Description: _____

☐ Household furniture and appliances:

☐
☐
☐
☐
☐
☐
☐☐
☐
☐
☐
☐
☐
☐

☐ Household furnishings:

☐
☐
☐
☐
☐
☐☐
☐
☐
☐
☐
☐

☐ Other items:

☐
☐
☐
☐☐
☐
☐
☐

☐ Pension/retirement fund/profit sharing/stock plan/401K:

☐
☐
☐

☐
☐
☐

**DESCRIPTION OF PROPERTY/
VALUE OF PROPERTY:**

You, Petitioner

Your Spouse, Respondent

☐ Motor vehicles:
Make _____
Model _____
VIN _____
Lien Holder _____

☐

☐

Make _____
Model _____
VIN _____
Lien Holder _____

☐

☐

10(b) PROPERTY ACQUIRED BEFORE MARRIAGE. (Check all boxes that apply.)

- ☐ I do not have any property that I brought into the marriage (separate property).
☐ My spouse, the Respondent does not have any property that he or she brought into the marriage. (separate property).
☐ I have property that I brought into the marriage (separate property). I want this property awarded to me as described below.
☐ My spouse, the Respondent, has property that he or she brought into the marriage. I want this property awarded to my spouse as described below.

Separate Property: (List the property and the value of the property, and check the box to tell the Court who should get the property.)

**DESCRIPTION OF PROPERTY/
VALUE OF PROPERTY**

You, Petitioner

Your Spouse, Respondent

☐
☐
☐
☐
☐
☐
☐
☐

☐
☐
☐
☐
☐
☐
☐
☐

11(a) DEBTS INCURRED DURING THE MARRIAGE: (check one box)

- ☐ My spouse and I did not incur any community debts during the marriage, OR
☐ We should divide the responsibility for the community debts incurred during the marriage as follows:

DESCRIPTION OF DEBT/
AMOUNT OF DEBT:

You, Petitioner

Your Spouse, Respondent

11(b) SEPARATE DEBTS. (Check all boxes that apply.)

- ☐ My spouse and I do not have any debts that were incurred prior to the marriage, OR
- ☐ I have separate debt that I incurred prior to the marriage which should be paid by me as described below:
- ☐ My spouse has separate debt that he or she incurred prior to the marriage which should be paid by my spouse as described below:

DESCRIPTION OF DEBT/
AMOUNT OF DEBT:

You, Petitioner

Your Spouse, Respondent

12. TAX RETURNS: After the Judge or Commissioner signs the Order of Legal Separation, the parties will file state and federal taxes as follows: _____

13. WRITTEN AGREEMENT. CHECK ONLY IF TRUE:

- ☐ My spouse and I have a written agreement signed by both of us about the maintenance of a spouse, division of property/debt, custody, parenting time, and child support for our child(ren), and I have attached a copy of the written agreement.

OTHER STATEMENTS TO THE COURT UNDER OATH: You must tell the court the truth.

Lying to the court is a crime and the court can punish you for lying. To file for legal separation, you must be able to tell the Court that the following statements are true. If the statements are not true, you cannot file for legal separation until the statements are true. Check the box in front of each statement if the statement is true. If you do not understand what the statements mean, read the instructions that go along with the Petition for Legal Separation.

14. ☐ TRUE The conciliation requirements under Arizona law either do not apply or have been met.

15. ☐ TRUE This court has jurisdiction to decide child custody matters under Arizona law.

REQUESTS TO THE COURT:

- A. LEGAL SEPARATION:** An order of legal separation.
- B. SPOUSAL MAINTENANCE/SUPPORT (ALIMONY):** ☐ Order neither party to pay spousal maintenance **OR** ☐ Order spousal maintenance/support to be paid by ☐ Petitioner, or ☐ Respondent through the Clerk of the Court in the amount of _____ per month, and the statutory fee, beginning with the first day of the month after the Judge or Commissioner signs the Legal Separation and continuing until the person receiving the spousal maintenance/support is deceased, or for a period of _____ months.
- C. COMMUNITY PROPERTY:** Make a fair division of all community property as requested in this Petition.
- D. COMMUNITY DEBTS:** Order each party to pay community debts as requested in the Petition, and to pay any other community debts unknown to the other party. Order each party to pay and hold the other party harmless from debts incurred by him or her since the parties separation on (date): _____.
- E. SEPARATE PROPERTY:** Award each party his or her separate property.
- F. CHILD CUSTODY AND PARENTING TIME (VISITATION):** Award custody and parenting time of the children common to the parties, and less than 18 years as follows: (Check either the sole custody box or the joint custody box. If you check the sole custody box, check only one box related to parenting time.)
- F.1.** ☐ **SOLE CUSTODY.** Mother is awarded the sole custody of _____ and/or Father is awarded the sole custody of _____ subject to parenting time as follows:
- ☐ Reasonable parenting time rights to the parent, who does not have custody, as will be described in the Parenting Plan attached to the Order of Legal Separation. **OR**
- ☐ Reasonable parenting time rights to the parent who does not have custody pursuant to the Maricopa County Parent Access/Parenting time Guidelines.
- ☐ Supervised parenting time between the children and ☐ Mother **OR** ☐ Father is in the best interest of the children because: (Explain the reasons for supervision or no parenting time. Use extra paper if necessary.),
- a. Name of the person who will supervise: _____
- b. Requested restrictions on parenting time: (explain here) _____
- _____
- _____
- c. The cost of supervised parent/child parenting time will be paid by ☐ the parent being supervised ☐ the parent having custody; ☐ shared equally by the parties.
- ☐ No parenting time rights to the parent who does not have custody is in the best interests of the child(ren) because: (Explain the reasons for no parenting time. Use extra paper if necessary):
- OR**
- F.2.** ☐ **JOINT CUSTODY:** Mother and Father agree to act as joint custodians of the child(ren) as set

forth in the Parenting Plan signed by the parties, if the Court agrees with the Parenting Plan.
(Remember, there can be no significant domestic violence in your marriage.)

- G. CHILD SUPPORT:** Order that child support will be paid by: ☐ Mother OR ☐ Father in a reasonable amount as determined by the Court under the Arizona Child Support Guidelines. (I will attach the Child Support Order to the Decree). Support payments will begin on the first day of the first month following the entry of the divorce decree. These payments, and a fee for handling, will be paid through the Clerk of the Court and collected by automatic wage assignment.
- H. INSURANCE AND HEALTH CARE EXPENSES FOR CHILDREN:** Order that ☐ Mother OR ☐ Father will pay for the health, medical, and dental insurance coverage for the child(ren) common to the parties and under the age of 18 years. Mother and Father will pay for all reasonable unreimbursed medical, dental, and health-related expenses incurred for the child(ren) in proportion to their respective incomes as described in the Parents' Worksheet, which I will submit with the Decree.
- I. TAX EXEMPTION:** The parties will claim the children as income tax dependency exemptions on federal and state income tax returns as follows:

Parent entitled to claim	Name of child	Current tax year	Later tax years
<input type="checkbox"/> Mother <input type="checkbox"/> Father			
<input type="checkbox"/> Mother <input type="checkbox"/> Father			
<input type="checkbox"/> Mother <input type="checkbox"/> Father			
<input type="checkbox"/> Mother <input type="checkbox"/> Father			

- J. OTHER ORDERS I AM REQUESTING** (Explain request here):

OATH AND VERIFICATION OF PETITIONER:

STATE OF ARIZONA)
County of Maricopa)ss.

I, the Petitioner, being duly sworn and under oath, state that I have read this Petition. All the statements in the Petition are true, correct, and complete to the best of my knowledge and belief.

SIGNED: _____
Petitioner's Signature

Subscribed and sworn to before me this date: _____.
(Month, Day, Year)

My Commission Expires:

NOTARY PUBLIC: _____

Name of Person Filing: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing: ☐ Self (Without an Attorney) ☐ Petitioner ☐ Respondent

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner/Plaintiff

Case No.: _____

SUMMONS

and

Name of Respondent/Defendant

**WARNING: This is an official document from the court that affects your rights. Read this carefully.
If you do not understand it, contact a lawyer for help.**

FROM THE STATE OF ARIZONA TO: _____
Name of Respondent/Defendant

1. A lawsuit has been filed against you. A copy of the lawsuit and other court papers are served on you with this **"Summons"**.
2. If you do not want a judgment or order taken against you without your input, you must file an **"Answer"** or a **"Response"** in writing with the court, and pay the filing fee. If you do not file an **"Answer"** or **"Response"** the other party may be given the relief requested in his/her Petition or Complaint. To file your **"Answer"** or **"Response"** take, or send, the **"Answer"** or **"Response"** to the Office of the Clerk of the Superior Court, 201 West Jefferson Street, Phoenix, Arizona 85003-2205 or the Office of the Clerk of the Superior Court, 222 East Javelina Drive, Mesa, Arizona 85210-6201 or Office of the Clerk of Superior Court, 14264 W. Tierra Buena Lane, Surprise, Arizona, 85374. Mail a copy of your **"Response"** or **"Answer"** to the other party at the address listed on the top of this Summons.
3. If this **"Summons"** and the other court papers were served on you by a registered process server or the Sheriff, within the State of Arizona, your **"Response"** or **"Answer"** must be filed within **TWENTY (20) CALENDAR DAYS** from the date you were served, not counting the day you were served. If this **"Summons"** and the other papers were served on you by a registered process server or the Sheriff outside the State of Arizona, your Response must be filed within **THIRTY (30) CALENDAR DAYS** from the date you were served, not counting the day you were served. Service by a registered process server or the Sheriff is complete when made. Service by Publication is complete thirty (30) days after the date of the first publication.

4. You can get a copy of the court papers filed in this case from the Petitioner at the address at the top of this paper, or from the Clerk of the Superior Court's Customer Service Center at 601 W. Jackson, Phoenix, Arizona 85003 or at 222 E. Javelina Drive, Mesa, Arizona 85210.
5. Requests for reasonable accommodation for persons with disabilities must be made to the office of the judge or commissioner assigned to the case, at least five (5) days before your scheduled court date.

SIGNED AND SEALED this date

MICHAEL JEANES, CLERK OF COURT

By _____
Deputy Clerk

Name of Person Filing: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self (without Attorney) or ☐ Attorney for ☐ Petitioner or ☐ Respondent

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner

Case Number: _____

PRELIMINARY INJUNCTION

AND

Name of Respondent

WARNING: This is an official Order from the court. It affects your rights. Read this Order immediately and carefully. If you do not understand it, contact a lawyer for help.

Your spouse has filed a ***"Petition for Dissolution"*** (Divorce) or ***"Petition for Annulment"*** or ***"Petition for Legal Separation"*** with the court. This Order is made at the direction of the Presiding Judge of the Superior Court of Arizona in Maricopa County. This Order has the same force and effect as any order signed by the judge. You and your spouse **must** obey this Order. This Order may be enforced by any remedy available under the law, including an ***"Order of Contempt of Court."*** To help you understand this Order, we have provided this explanation. Read the explanation and then read the statute itself. **If you have any questions, you should contact a lawyer for help.**

EXPLANATION: (What does this Order mean to you?)

1. **ACTIONS FORBIDDEN BY THIS ORDER:** From the time the ***"Petition for Dissolution"*** (Divorce) or ***"Petition for Annulment"*** or ***"Petition for Legal Separation"*** is filed with the court, until the judge signs the Decree, or until further order of the court, both the Petitioner and the Respondent **shall not** do any of the following things:
 - ✓ You may **not** hide earnings or community property from your spouse, **AND**
 - ✓ You may **not** take out a loan on the community property, **AND**
 - ✓ You may **not** sell the community property or give it away to someone, **UNLESS** you have the written permission of your spouse or written permission from the court. The law allows for situations in which you may need to transfer joint or community property as part of the everyday running of a business, or if the sale of community property is necessary to meet necessities of life, such as food, shelter, or clothing, or court fees and attorney fees associated with this action. If this applies to you, you should see a lawyer for help, **AND**
 - ✓ Do **not** harass or bother your spouse or the children, **AND**
 - ✓ Do **not** physically abuse or threaten your spouse or the children, **AND**
 - ✓ Do **not** take the minor children, common to your marriage, out of the State of Arizona for any reasons, without a written agreement between you and your spouse or a Court Order, **before** you take the minor children out of the State.
 - ✓ Do **not** remove, or cause to be removed, the other party or the minor children of the parties from any existing insurance coverage, including medical, hospital, dental, automobile and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.

STATUTORY REQUIREMENTS: Arizona Law, A.R.S. 25-315(A) provides:

- 1(a). **RESTRICTIONS ON PROPERTY OF THE MARRIAGE:** That both parties are enjoined from transferring, encumbering, concealing, selling, or otherwise disposing of any of the joint, common or community property of the parties, **except** if related to the usual course of business, the necessities of life, or court fees and reasonable attorney fees associated with an action filed under this article, without the written consent of the parties or the permission of the court.
- 1(b). **REQUIREMENTS OF BEHAVIOR:** That both parties are enjoined from molesting, harassing, disturbing the peace, or committing an assault or battery on, the person of the other party or any natural or adopted child of the parties.
- 1(c). **RESTRICTIONS ABOUT YOUR MINOR CHILDREN:** That both parties are enjoined from removing any natural or adopted minor child(ren) of the parties, then residing in Arizona, from the jurisdiction of the court without the prior written consent of the parties or the permission of the court.
- 1(d). **RESTRICTIONS ABOUT INSURANCE:** That both parties are enjoined from removing, or causing to be removed, the other party or the minor children of the parties from any existing insurance coverage, including medical, hospital, dental, automobile and disability insurance. Both parties shall maintain all insurance coverage in full force and effect.
2. **EFFECTIVE DATE OF THIS ORDER:** This Order is effective against the person who filed for divorce, annulment, or legal separation (the Petitioner) when the Petition was filed with the court. It is effective against the other party (the Respondent) when it is served on the other party, or on actual notice of the Order, whichever is sooner. This Order shall remain in effect until further order of the court, or the entry of a Decree of Dissolution, Annulment, or Legal Separation.
3. **ORDER TO PETITIONER:** You **must** serve a copy of this Order upon the Respondent, along with a copy of the Petition for Dissolution, Annulment or Legal Separation, the Summons, and other required court papers.
4. **WARNING:** This is an official Court Order. If you disobey this Order, the court may find you in contempt of court. You may also be arrested and prosecuted for the crime of interfering with judicial proceedings and any other crime you may have committed by disobeying this Order.
5. **LAW ENFORCEMENT:** You or your spouse may file a certified copy of this Order with your local law enforcement agency. You may obtain a certified copy from the Clerk of the Court that issues this Order. If any changes are made to this Order and you have filed a certified copy of this Order with your local law enforcement agency, you **must** notify them of the changes.

6. **DESCRIPTION OF THE PARTIES:**

Petitioner:

Name: _____
Height: _____
Driver's License No.: _____
Date of Birth: _____

Gender: ☐ Male ☐ Female
Weight: _____
Social Security No.: _____

Respondent:

Name: _____
Height: _____
Driver's License No.: _____
Date of Birth: _____

Gender: ☐ Male ☐ Female
Weight: _____
Social Security No.: _____

GIVEN UNDER MY HAND AND THE SEAL OF THE COURT this ____ day of _____, _____.

Clerk of the Superior Court

By: _____, Deputy Clerk

Petitioner's Name or Lawyer's Name: _____
Address: _____
City, State, Zip Code: _____
ATLAS Number: _____
Lawyer's Bar Number: _____
Representing ☐ Self (without a Lawyer) or ☐ Attorney for ☐ Petitioner ☐ Respondent

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Petitioner's Name

Case Number: _____

**CHILD SUPPORT
INFORMATION FORM**

Respondent's Name

STATE OF ARIZONA)
County of Maricopa)ss.

The purpose of this form is to get the information needed to set up a temporary child support order. This form must be completed if you have minor children, and are filing a Petition or Response for Dissolution of Marriage, (Divorce), or Petition or Response for Legal Separation. If you run out of space to write on this form, please attach additional sheets of paper.

1. INFORMATION ABOUT YOU:

Your name (including middle initial): _____

Your address: _____

Your social security number: _____

Your employer's names, address and telephone number: _____

2. INFORMATION ABOUT YOUR SPOUSE:

Your spouse's name (including middle initial): _____

Your spouse's address: _____

Your spouse's social security number, if known: _____

Your spouse's employer name, address and telephone number: _____

3. INFORMATION ABOUT YOUR CHILD(REN): Please give us the name, social security number (if any), and birthdate of your child(ren).

NAME

SOCIAL SECURITY NUMBER

DATE OF BIRTH

_____	_____	_____
_____	_____	_____
_____	_____	_____

A. With whom does each of your children live most of the time? ☐ Mother or ☐ Father

B. Where do the children live now? (Please give a complete address for each child.)

- About how many days each week does the other parent see the children?
_____ days

- About how much time each day? _____ hours

C. MEDICAL INSURANCE:

- Who provides medical insurance for the children? ☐ Mother or ☐ Father

- How much does that parent pay each month for the children's medical insurance?
\$ _____

- If you are not sure how much it costs to insure the children, state how much that parent pays and for how many people: \$ _____ Number of people _____

D. DAY CARE:

- Do the child(ren) require day care? ☐ Yes ☐ No

- If the child(ren) require day care, who pays for it? ☐ Mother or ☐ Father

- How much does daycare cost each month on average over the entire year? \$ _____

4. INFORMATION ABOUT SPOUSAL MAINTENANCE/SUPPORT.

A. ● Does Mother regularly pay court-ordered spousal maintenance/support (alimony)?
☐ Yes ☐ No

- If so, how much each month? \$ _____

B. ● Does Father regularly pay court-ordered spousal maintenance/support?

- ☐ Yes ☐ No

- If so, how much each month? \$ _____

5. INFORMATION ABOUT INCOME.

A. What is Mother's gross (total) monthly income (before deductions and taxes)? \$ _____

B. What is Father's gross (total) monthly income (before deductions and taxes)? \$ _____

6. INFORMATION ABOUT OTHER CHILDREN.

A. ● Does Mother pay court-ordered child support for any other children? ☐ Yes ☐ No

- If so, how much each month? \$ _____

B. ● Does Father pay court-ordered child support for any other children? ☐ Yes ☐ No

- If so, how much each month? \$ _____
- C. ● Does Mother support any other natural or adopted children who also live with Mother?
☐ Yes ☐ No
 If so, how many and what are their names, ages and dates of birth? _____

- D. ● Does Father support any other natural or adopted children who also live with Father?
☐ Yes ☐ No
 ● If so, how many and what are their names, ages and dates of birth? _____

7. OTHER CHILD SUPPORT ORDERS.

- Are there any other child support orders in effect for any of the children identified in # 6 above?
☐ Yes ☐ No
- If so, list the court(s) and case number(s): _____

I certify under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed and signed this _____ day of _____, _____.
 (Day) (Month) (Year)

 Your signature

IF BOTH PARTIES AGREE: If you have previously discussed the issue of child support with your spouse, and have reached an agreement on how much child support should be paid and who should pay it and who should receive it, fill in the information below. **Then BOTH YOU AND YOUR SPOUSE MUST SIGN THE FORM** in the space provided.

- The amount of child support to be paid each month \$ _____
- The name of the person who will pay child support is: _____
- The name of the person who will receive child support is: _____
- We came up with the amount of child support by considering the following things: _____

- Have you and your spouse agreed that one spouse will pay the bills instead of paying child support? If the answer is "yes," list each bill and the amount to be paid. _____

We BOTH certify under penalty of perjury that the foregoing is true and correct to the best of our knowledge, and that we have not been put under duress, coerced, or threatened to sign this document.

Executed/Signed this date: _____

Executed/Signed this date: _____

Signature of Petitioner

Signature of Respondent

ADDRESS INFORMATION. It is very important for you (Petitioner and Respondent) to keep the court informed of your most current address. This means that if the address information on this form is incorrect or if you change addresses, you must contact the Clerk of the Court and give them your new or current address. Change of Address forms can be obtained at the Self-Service Center located at both courthouse locations: 101 West Jefferson, Phoenix, Arizona, or 222 East Javelina, Mesa, Arizona, or on the Internet at www.superiorcourt.maricopa.gov/ssc/sschome.html.

IMPORTANT INFORMATION FOR RESPONDENTS:

If you AGREE with the information in this form -- If you are the Respondent and you sign this form, it is not deemed to be a legal appearance and you shall not be charged an appearance fee. If you and your spouse agree to the amount of child support and sign this form, the court will sign a temporary order that will have either your employer or your spouse's employer automatically take child support from each paycheck each month, and forward it to Central Processing. You are warned that temporary child support is subject to judicial officer discretion, may be modified or changed, and the modification or change may be retroactive, which means that the judicial officer can change the amount of child support owed back to the time you filed this document with the court.

If you DISAGREE with the information in this form - If you disagree with the Petition for Dissolution of Marriage or Legal Separation with Children and/or the information contained in PETITIONER'S CHILD SUPPORT INFORMATION FORM, you should file a timely RESPONSE, or a RESPONSE TO CHILD SUPPORT INFORMATION FORM of your own and see a lawyer for help. You will be charged a Response fee upon filing. If you do not file a RESPONSE, or a RESPONSE TO CHILD SUPPORT INFORMATION FORM, an amount for child support will be automatically calculated and taken from your paycheck. If you live in the State of Arizona, you have 20 days from the date you were served with the Petition to file a RESPONSE or a RESPONSE TO CHILD SUPPORT INFORMATION FORM. If you live in a state other than Arizona, you have 30 days from the date you were served with the Petition to file a RESPONSE or a RESPONSE TO CHILD SUPPORT INFORMATION FORM. If you live in a country other than the United States, or if you were served by publication, ask a lawyer for help.

Petitioner's Name or Attorney's Name: _____
Address: _____
City, State, Zip Code: _____
Telephone: _____
ATLAS Number: _____
Lawyer's Bar Number: _____
Representing ☐ Self, (Without Attorney) or ☐ Attorney for ☐ Petitioner or ☐ Respondent

Respondent's Name or Attorney's Name: _____
Address: _____
City, State, Zip Code: _____
Telephone: _____
ATLAS Number: _____
Lawyer's Bar Number: _____
Representing ☐ Self, (Without Attorney) or ☐ Attorney for ☐ Respondent or ☐ Petitioner

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner

Case Number: _____

**(Optional) AGREEMENT NOT TO
ESTABLISH AND TEMPORARY CHILD
SUPPORT AT THIS TIME (UNDER
ADMINISTRATIVE ORDER 99-029)**

Name of Respondent

STATE OF ARIZONA)
County of Maricopa) ss.

1. **AGREE AND UNDERSTAND.** I have read this Agreement and understand and agree with what is written in this document.
2. **20 DAY REQUIREMENT.** I understand, and, by signing this Agreement, state that this Agreement is being filed no later than 20 days after the filing of the Affidavit or Acceptance of Service of the Petition for Dissolution of Marriage with Children, or Petition for Legal Separation with Children.
3. **NO TEMPORARY CHILD SUPPORT ORDER AT THIS TIME.** I understand and agree that the Court will not be signing an Order for Temporary Child Support at this time. I also understand that if I want to pay or receive temporary child support prior to the conclusion of my case, I will need to file and serve a Petition for Temporary Child Support.
4. **NO APPEARANCE BY RESPONDENT.** I understand that by signing this document the Respondent has not made a formal appearance and is not submitting to the jurisdiction of this Court.
5. **NO DURESS OR COERCION. COMPLETE AGREEMENT.** I am not under any force, threats, duress, coercion, or undue influence from anyone, including the other party, to sign this Agreement.

6. **LEGAL ADVICE.** I understand that even if I am representing myself without a lawyer, I have the right to be represented by a lawyer. I have the right to call a lawyer and get legal advice before I sign this Agreement.

SIGNATURE BY PETITIONER: I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____
[Date]

PETITIONER'S SIGNATURE

SIGNATURE BY RESPONDENT: I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____
[Date]

RESPONDENT'S SIGNATURE

SIGNATURE OF EACH LAWYER (if applicable):

Approved by Petitioner's Lawyer: _____

Date: _____

Approved by Respondent's Lawyer: _____

Date: _____

Name of Person Filing Document: _____
Your Address: _____
Your City, State, and Zip Code: _____
Your Telephone Number: _____
Atlas Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self (Without Attorney) OR ☐ Attorney for ☐ Petitioner OR ☐ Respondent

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner

and

Name of Respondent

Case Number: _____

**AFFIDAVIT REGARDING
MINOR CHILDREN**

NOTICE: This "Affidavit Regarding Minor Children" is required for all custody cases. You must fill out this Affidavit completely, and provide accurate information. Use additional paper if necessary. You must give copies of this Affidavit and all other required documents to the other party, and to the judge.

- 1. CHILDREN OF THE PARTIES WHO ARE UNDER 18 YEARS OLD.** The following child(ren) are under age 18 and were born to, or adopted by, me and the other party.

Name _____	Name _____
Birthdate: _____ Age: _____	Birthdate: _____ Age: _____
Name _____	Name _____
Birthdate: _____ Age: _____	Birthdate: _____ Age: _____

- 2. INFORMATION REGARDING WHERE THE CHILDREN UNDER 18 YEARS OLD HAVE LIVED FOR THE LAST 5 YEARS.**

Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with: _____
City, State: _____	Relationship to Child: _____

Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with: _____
City, State: _____	Relationship to Child: _____

Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with: _____
City, State: _____	Relationship to Child: _____

Child's Name: _____	Dates: From _____ To _____
Address: _____	Lived with: _____
City, State: _____	Relationship to Child: _____

- 3. COURT CASES IN WHICH I HAVE BEEN A PARTY/WITNESS THAT INVOLVED THE CUSTODY PARENTING TIME OF THE CHILD(REN).** (Check one box.)

☐ I have or ☐ I have not been a party/witness in court in this state or in any other state that involved the custody parenting time of the child(ren) named above. (If so, explain. If not, go on.)

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

4. INFORMATION REGARDING PENDING COURT CASES RELATED TO THE CUSTODY OF THE CHILD(REN). (Check one box.)

☐ I do have or ☐ I do not have information about a custody parenting time court case relating to any of the children named above that is pending in this state or in any other state. (If so, explain. If not, go on.)

Name of each child: _____
Name of Court: _____ Court Location: _____
Court Case Number: _____ Current Status: _____
How the child is involved: _____
Summary of any Court Order: _____

5. CUSTODY OR PARENTING TIME CLAIMS OF ANY PERSON. (Check one box.)

☐ I do know or ☐ I do not know a person other than the Petitioner or the Respondent who has physical custody or who claims custody or parenting time rights to any of the children named in this Affidavit. (If so, explain below. If not, go on.)

Name of each child: _____
Name of person with the claim: _____
Address of person with the claim: _____
Nature of the claim: _____

OATH AND VERIFICATION

State of Arizona)
Maricopa County) sworn statement

I have read the "**Affidavit of Minor Children**" and know of my own knowledge that the information stated in it is true and correct, and that any false information may constitute perjury by me.

Name of Person Making Affidavit

Subscribed and sworn to before me on this date: _____
(month, day, year)

My commission expires: _____
Notary Public

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner

Case Number:

**ORDER AND NOTICE TO ATTEND
PARENT INFORMATION
PROGRAM CLASS**

Name of Respondent

READ ME. This is an Official Court Order. If you fail to obey this Order, the court may find you in Contempt of Court.

THE COURT FINDS:

This case involves minor child(ren) and is an action for:

- ☐ Dissolution of Marriage;
☐ Legal Separation; or
☐ Paternity with a Request to Determine Custody or Parenting Time or Child Support.

THE COURT ORDERS pursuant to ARS § 25-352:

1. **ATTEND CLASS.** You must attend and complete the Parent Information Program Class.
2. **WITHIN 45 DAYS.** Both the Petitioner and the Respondent **must** complete this class within 45 days from the date the Respondent is served with, or accepts service of, the Petition/Complaint. The Respondent **must** register for and complete the course whether or not a **“Response”** or **“Answer”** to the Petition/Complaint is filed.
3. **PAY THE CLASS FEE.** Each party must pay the class fee to the Program Provider, or obtain a fee deferral or waiver.
4. **FILE CERTIFICATE OF COMPLETION.** Both the Petitioner and the Respondent **must** each file a **“Certificate of Completion”** with the Clerk of the Court immediately after completing the class and prior to receiving the final judgment/order/decree in the case.
5. **FAILURE TO ATTEND CLASS.** If you file a Petition/Complaint or **“Response”** or **“Answer”** and do **not** complete the Parent Information Program Class, the judge **may not** sign your papers and you **may not** get the things you asked the court to give you. You may also be denied the right to seek modification and/or enforcement of the decree/judgment/order until completion of the class. If you are the party required to file a Response/Answer and choose not to file a **“Response”** or **“Answer,”** and do not complete the Parent Information Program Class, you **may be denied** the right to seek modification and/or enforcement of the decree/judgment/order until completion of the class.

Norman J. Davis

Presiding Judge, Family Court Department

PARENT INFORMATION PROGRAM NOTICE

Parent Information Program - This is a very important document. Read it completely. You and the other parent **must** attend and complete a class in the **PARENT INFORMATION PROGRAM**. You do **NOT** attend the class with the other parent. As a precaution against any type of abuse or harassment, you and the other parent **MUST** attend **SEPARATE** classes. This is **NOT** a parenting skills class. The purpose of the program is to give parents information about how children are affected by matters that involve family courts: divorce, paternity, or custody matters and parenting time. This Notice applies to all parents who file any of the following actions in the Superior Court of Arizona in Maricopa County on or after January 1, 1997:

- (1) dissolution of marriage or legal separation that involves a natural or adopted minor, un-emancipated child common to the parties, or
- (2) paternity with a request that the court determine custody or parenting time or child support, or
- (3) any other domestic relations cases if attendance is ordered by the court.

WARNING: ATTENDANCE IS REQUIRED. (A.R.S. § 25-352 and Administrative Order No. 96-078).

ATTENDANCE AT THE PARENT INFORMATION CLASS IS REQUIRED BY LAW AND BY THIS COURT. IF YOU DO NOT ATTEND THE CLASS, THE JUDGE MAY NOT SIGN YOUR PAPERS AND YOU MAY NOT GET THE THINGS YOU ASKED THE COURT TO DO. THE JUDGE MAY ALSO FIND YOU IN CONTEMPT OF COURT.

Notice to Other Party.

After you file your court papers with the Court, you must serve this document on the other parent. If you have questions on how to serve the other party, the Self-Service Center has forms and instructions on service. There are three Self-Service Center locations; one in downtown Phoenix on the first floor of the East Court Building located at 101 West Jefferson Street; one in the east valley in the Southeast Complex located at 222 East Javelina Avenue in Mesa and one in the northwest valley located at 14264 W. Tierra Buena Lane in Surprise.

Parent Information Class.

You may choose which class you want to attend. A list of approved classes is provided along with this Notice. These classes meet the requirements of the Parent Information Program. You may also choose to attend a different class that is comparable to the classes listed. However, you will have to tell the judge why that class is like the classes on the list of approved classes and you may have to provide all the materials from that class and information about it to show it is comparable. It will be up to the judge to decide if that class meets Parent Information Program requirements.

Registration (sign-up) for class.

You must sign up for the class in advance. You should sign up for the class as soon as you receive this Notice. There may be a limit on the number of people that can attend each class. That means that YOU MUST CALL TO SIGN UP for the class BEFORE the class is scheduled to start. The telephone numbers for all of the Court-approved provider classes are included on the attached list of approved classes.

Information regarding the provider classes may be found on the Conciliation Services website at <http://www.superiorcourt.maricopa.gov/conciliation/index.asp>

Cost.

- (1) You are required to pay the provider of the class the fee it charges. Prior to September 22, 2003, that fee cannot be more than thirty dollars (\$30.00). **Effective September 22, 2003, the fee for the class may be no more than forty dollars (\$40.00).** You must bring your case number and a picture I.D. to the class.
- (2) If you choose a class that is not listed, you are required to pay the provider of that class the fee it charges. The provider of the class may charge you whatever it wants.
- (3) If your filing fees have been waived or deferred, you must bring a copy of your certificate of waiver or deferral to the program listed.

Class procedures.

Arrive at the class a few minutes early to check in. **You must check in at the class and you must check out of the class. If you do not check in and out, your attendance may not be counted.** You must bring picture identification with you. **DO NOT BRING CHILDREN TO THE CLASS.** A **“Certificate of Completion”** of the class will be given to you at the end of the class. After you have attended the class and have received the **“Certificate of Completion”**, you must bring the certificate to the court and file it with the Clerk of the Court. Remember to bring your case number to the class.

Special needs and/or Questions.

If, due to a disability, you need special accommodations to attend this class, or if you have any questions about the Parent Information Program, please contact the Maricopa County Parent Information Program office at 201 West Jefferson Street, third floor, Phoenix, Arizona, or telephone 602-506-1448 when you receive this Notice.

APPROVED PARENT INFORMATION CLASSES – MARICOPA COUNTY

EAST VALLEY

After September of 2003, Planned Parenthood of Central and Northern Arizona will no longer be a provider for the Parent Information Program .

Ahwatukee

Planned Parenthood of Central and Northern Arizona – 4515 E. Muirwood Drive (Summit School of Ahwatukee), 85048; Tuesday & Thursday 6:00 PM-10:00 PM; (602) 263-4244.

Gilbert

Center for Families in Transition – New Hope Community Church, 1380 E. Guadalupe Rd., 85234; One Saturday a month 1:00 PM – 5:00 PM; (480) 946-9680 or online at www.DivorceAndKids.com; Sun Valley Community Church, 202 S. Gilbert Rd., 85233; third Thursday every month 6:00 PM – 10:00 PM; (480) 855-0075 or online at www.zachwhaley.com

Mesa

Advanced Counseling Center - 1201 S. Alma School Rd., Suite 7550, 85210 (Across from Fiesta Mall on the 7th floor of the Bank of America Bldg at the corner of Southern & Alma School Rd.), (parking garage is located next door) Monday 5:30 PM – 9:30 PM. Saturday 12:30 PM – 4:30 PM (480) 655-9550.

Arizona Counseling and Education – 1563 S. Gilbert Rd. 85204. (Hampton Inn) Wednesday 6:00 PM – 10:00 PM; Saturday 8:30 AM-12:30 PM. (480) 839-9400. www.ace4az.org
Arizona Interfaith Counseling – 2024 E. University Dr, (Grace United Church, Rm 501) 85213. Thursday 6:00 PM-10:00 PM; Saturday 9:00 AM-1:00 PM; (480) 969-2783.

Center for Families in Transition - 2130 E. University Dr., 85213 (Trinity Baptist). Monday 5:30 PM – 9:30 PM or 1:00 PM – 5:00 PM; (480) 946-9680 or online at www.DivorceAndKids.com

Child Crisis Center – East Valley, Inc. – 604 W. 9th St., 85201; Two Tuesdays a month 4:45 PM-9:00 PM. One Saturday a month 8:45 AM-1:00 PM (480) 969-2308.

Tempe

Arizona Interfaith Counseling – 1565 E. Warner Rd. (Mission Del Sol, Room 201) 85284; Monday 6:00 PM-10:00 PM; (480) 969-2783.

Center for Families in Transition – Bethany Community Church – 6240 S. Price Rd., 85283 (Building F-5); 1st, 2nd, 4th, and 5th Thursday every month 6:00 PM – 10:00 PM or two Saturdays a month 8:30 AM – 12:30 PM; (480) 855-0075 or online at www.zachwhaley.com

Phoenix Interfaith Counseling – 3910 S. Rural Rd., Ste. J, 85282; Tuesday 5.00 PM - 9:00 PM; (480) 317-9868.

Planned Parenthood of Central and Northern Arizona – 415 W. Southern #104-D, 85282; Saturday 9:00 AM-1:00 PM; (602) 263-4244.

WEST VALLEY

Glendale

Concepts for Change – 5008 W. Glendale Ave., 85301; Wednesday 6:00 PM-10:00 PM, Saturday 8:00 AM-12:00 Noon. SPANISH class first Saturday of month 1:00 PM-5:00 PM; (623) 930-9317.

Phoenix Interfaith Counseling –4444 W. Northern Ave, C-1,(Community Church of Joy), 85301; Wednesday and Thursday 5:30 PM – 9:30 PM; 2100 N. 75th Ave., 85308; Thursday 5:30 PM – 9:30 PM; both locations (623) 939-6516.

Planned Parenthood of Central and Northern Arizona – 6670 W. Sack Dr. (Arrowhead Wellness Connection Center), 85308; Tuesday 6:00 PM – 10:00 PM; (602) 263-4244.

Litchfield Park

Phoenix Interfaith Counseling – 300 N. Old Litchfield Park Rd. (The Church at Litchfield Park), 85340; Thursday 5:30 PM-9:30 PM; (602) 248-9247.

Tolleson

Western Judicial Services – 9550 W. Van Buren , Ste. 18. 85353;Thursday 5:30 PM-9:30 PM; SPANISH – One Thursday a month 5:30 PM-9:30 PM. (623-936-8828).

CENTRAL VALLEY

Phoenix

Arizona Counseling and Education – 10210 N. 26th Dr. (Comfort Suites), 85021; Wednesday 6:00 PM-10:00 PM; 10402 N. Black Canyon Hwy, (Premier Inns), 85051; Saturdays 8:30 AM-12:30 PM; (623) 742-6422 or www.azce4az.org

Catholic Social Service – 1825 W. Northern, 85021, English & Spanish. Spanish on 2nd Wednesday of month 6:00 PM – 10:30 PM. English on 1st and 3rd Thursday of month 6:00 PM – 10:00 PM; Occasional change may occur. Please call to confirm time & date: (602-997-6105, Ext 3305). Translators for other languages available on request.

Center for Families in Transition – 5757 N. Central Ave.(North Phx Baptist Family Life Center), 85012; One Saturday a month 1:00 PM – 5:00 PM; (480) 946-9680 or www.DivorceAndKids.com

Devereux Arizona – 10640 N. 28th Dr., Ste A202, Phoenix, 85029. 2nd, 3rd, and 4th Wednesday of month. (602)896-3106.

Parents Anonymous of Arizona – 6741 N. 7th St. Tuesday 5:00 PM-9:00 PM. Saturday 9:00 AM-1:00 PM.; Monday 9:00 AM – 1:00 PM (Spanish); (602) 248-0428).

Phoenix Interfaith Counseling – 555 W. Glendale Ave., 85021; Wednesday 5:30 PM-9:30 PM; (480-317-9868;12835 N. 32nd St, 85032; Saturday 9:00 AM-1:00 PM; (602) 992-7521.

Planned Parenthood of Central and Northern Arizona – 5651 N. 7th St. 85014. Thursday 6:00 PM-10:00 PM. (Spanish) Saturday 9:00 AM-1:00 PM. (SPANISH). Thursday 6:00 PM – 10:00 PM (English), Saturday 9:00 AM – 1:00 PM; 2255 W. Northern Ave. B100, 85021. Wednesday 6:00 PM-10:00 PM. Saturday 9:00 AM-1:00 PM; (602)263-4244 for both locations.

NORTH VALLEY

Paradise Valley

Phoenix Interfaith Counseling – 12835 N. 32nd St. 85032; Saturday 9:00 AM-1:00 PM; (602) 992-7521.

Planned Parenthood of Central and Northern Arizona – 3929 E. Bell Rd. (Paradise Valley Hospital), 85032; Monday 6:00 PM; Saturday 9:00 AM – 1:00 PM, (602) 262-4244.

NORTHEAST VALLEY

Scottsdale

Arizona Counseling and Education – 16630 N. Scottsdale Rd (Sleep Inn), 85254; Monday 6:00 PM-10:00 PM; (480) 839-9400 or www.ace4az.org

Arizona Interfaith Counseling – 3535 E. Lincoln Drive (Palo Cristi Presbyterian Church), 85253; one Saturday a month 9:00 AM – 1:00 PM; (480) 969-2783.

Center for Families in Transition – 8655 E. Via De Ventura, Ste. G-235, 85258; First and 3rd Tuesday of month 4:30 PM-8:30 PM. Second Saturday of month 8:30 AM-12:30 PM (Spanish); (602) 694-4806 or www.centerforfamilies.net

Devereux Arizona – 6436 E. Sweetwater, 85254; 1st Saturday of month 9:00 AM-1:00 PM; (602) 896-3106.

NORTHWEST VALLEY

Peoria

Advanced Counseling Center – 8615 W. Peoria Ave., #7, 85345; Saturday 9:00 AM-1:00 PM; (602) 252-9048.

Western Judicial Services – 8401 W Monroe, 85345 (Peoria Municipal Court) Monday 5:30 PM-9:30 PM.; Tolleson – 9550 W. Van Buren, Suite 18, Thursday 5:30 PM – 9:30 PM: Spanish class on 4th Thursday of the month 5:30 PM – 9:30 PM. Both locations (623) 936-8828.

ALL OF THE ABOVE PROVIDERS ARE REQUIRED TO ACCOMMODATE THE NEEDS OF SPANISH SPEAKING CLIENTS.

SPECIAL NEEDS OR ACCOMMODATIONS

If, due to a disability, language problem, or other special need, you have difficulty finding a Parent Information Class that can accommodate you, please contact the Maricopa County Parent Information Program office, telephone number (602)506-1448, for assistance.

PLEASE NOTE: You do NOT attend the class with the other parent. As a precaution against any type of abuse or harassment, you and the other parent **MUST** attend **SEPARATE** classes. You may each take the class from the same agency, but **NOT** at the same time.

You may choose which class you want to attend. The court will not assign you to attend a specific class. If you are led to believe otherwise, please contact the Parent Information Program office at 602-506-1448.

Name of Person Filing: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number (if applicable): _____
Representing ☐ Self (Without Attorney) or ☐ Attorney for _____

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

Name of Petitioner

Case Number: _____

NOTICE REGARDING CREDITORS

Name of Respondent

NEW ARIZONA STATE LAW

On July 18, 2000, A NEW STATE LAW REQUIRED all actions for DIVORCE or LEGAL SEPARATION to include the following NOTICE TO PETITIONER and for PETITIONER TO SERVE this same NOTICE ON RESPONDENT. (ARS 25-318(F).)

YOU AND YOUR SPOUSE ARE RESPONSIBLE FOR COMMUNITY DEBTS. The court usually requires/orders one spouse or the other to pay certain community debts in, or through, the Decree of Dissolution or Legal Separation. A court order that does this is binding on the spouses **only, not the creditors**. You and your spouse are legally responsible for these community debts whether you are married, divorced, or legally separated. These debts are matters of contract between **both of you** and your creditors (such as banks, credit unions, credit card companies, utility companies, medical providers and retailers). On request, the court may impose a lien against the separate property of a spouse to secure payment of certain community debts.

CONTACT CREDITORS: You may want to contact your creditors to discuss the debts and the effects of your divorce/legal separation on your debts. To assist you in identifying your creditors, you may obtain a copy of your spouse's credit report by making a written request to the court for an order requiring a credit reporting agency to release the report to you. The credit report will help you identify accounts, account numbers and account balances. In addition, within thirty **(30)** days after receipt of a request from a spouse who is party to a divorce or legal separation, which includes the court and cause number of the action, creditors are required, by law, to provide information as to the balance and account status of any debts for which you or your spouse may be liable to the creditor.

WARNING: If you do not understand this notice, you should contact an attorney for advice about your legal rights and obligations.

You may wish to use the attached form, or one that is similar, to contact your creditors. **Do not file the attached form with the court.**

REQUEST FOR ACCOUNT INFORMATION FROM CREDITOR(S)

DATE: _____

CREDITOR'S NAME: _____

CREDITOR'S ADDRESS: _____

Regarding: Superior Court of Arizona in Maricopa County
Case Name: _____
Case Number: _____

Pursuant to Arizona State Law (ARS 25-318), this letter requests the balance and account status of any debt for which the following individuals may be liable to you. (Arizona law requires that you provide this information within thirty (30) days of receipt of this letter.)

INFORMATION ABOUT DEBTORS/SPOUSES:

Your Name: _____

Your Address: _____

Your Phone Number: _____

Your Spouse's Name: _____

Your Spouse's Address: _____

INFORMATION ABOUT THE ACCOUNT:

Account Number(s): _____

If you have any questions or if I can be of further assistance, please feel free to contact me.

Sincerely,

Your name: _____

Your signature: _____